15.4: Unions

Unionization of Registered Nurses

Labour unions are organizations that represent workers in their negotiations with employers. Unions are based on a simple concept: working women and men joining together to gain strength in numbers and presenting a united voice to address issues of concern and create safe work environments. Unions provide their members with many benefits and supports. The primary purpose of a union is to engage in collective bargaining with the employer to determine issues related to wages, terms and conditions of work, and worker security, and to support workers during conflict.

Collective bargaining is a process whereby members of a profession, supported by their union, meet with representatives for the employer and discuss and negotiate agreements on key issues and concerns. This collective bargaining culminates in a product called a collective bargaining agreement (CBA). The overall goal of a CBA is to ensure that mutual agreement on issues of employee safety and fair treatment on the job are defined and enacted. In short, a union works to ensure overall better working conditions for its members, thus contributing to care environments where safe, quality nursing care can be provided.

In addition to the role it plays in negotiating an agreement and ensuring the day-to-day administrative requirements of the CBA are upheld, the union has two other relevant functions. Unions lobby and work with governments to improve labour and occupational health and safety legislation (as safe working conditions contribute to the safety of patients and workers). Unions also assist in ensuring standards are upheld. For instance, some people believe that workers’ rights are already protected by the employment standards legislation. Although there is legislation in place to provide minimum standards in the workplace, violations of these standards are very difficult to enforce. In situations of a worker challenge (e.g., when standards are not being met), employers have a financial advantage in that they are able to hire lawyers to represent their organization through the process of investigation. Employees, on the other hand, are often left to
represent themselves. Unions help to level the playing field by assisting employees through processes negotiated between the workers and the employer. Employees are often entitled to paid time to attend meetings and hearings pertaining to their concern and are afforded representation throughout their dealings with the employer.

### In-Scope and Out-of-Scope Positions

Upon graduation most RNs will enter into roles that are categorized as **in-scope** positions. An in-scope designation refers to positions that are unionized. These roles usually apply to all direct care providers including registered nurse educators, resource nurses, etc. This is in contrast to **out-of-scope** positions, which usually apply to management and senior administrative roles and do not fall within the category of unionization. Therefore, they are not part of the CBA and are not afforded the benefits and protections of such an agreement. In determining if a position should be out-of-scope, one considers the responsibilities of the work. Traditionally positions that are responsible for hiring, firing, and disciplining workers are classified as out-of-scope.

### Collective Bargaining Agreement

The collective bargaining agreement (CBA) essentially contains the “rules” that direct the workplace. Often a CBA is thought to be a document belonging solely to the members and its representative union. This is not so—in fact, the CBA is a joint agreement between the members of the union and the employer. In this regard, the agreement affects all members of the union, as well as having an equal effect on the employer. Therefore, enforcement of the CBA is essential to upholding the terms of the agreement and resolving issues in a standardized, agreed-upon approach. Allowing the employer or members to violate any of the terms and conditions erodes application and utilization of the agreement for all involved and jeopardizes the cohesiveness and administration of the workplace.

### Collective Bargaining Accomplishments

Prior to the unionization of nursing, RNs were paid very low wages and worked extremely long hours in unsafe environments. Some of the advances unions have made for RNs include:

- a set, predictable work week;
- limitations on being required to work more than a set number of shifts or hours in a row;
- recognition that hours or shifts worked in excess of the set agreement must be paid at overtime rates;
- premiums for in-charge responsibilities, weekend shifts, etc.;
- the right to scheduled breaks;
- vacation, statutory holidays, and leaves of absence;
- the right to representation in disputes with employers;
- wage parity with comparator male-dominated groups (e.g., police officers, firefighters);
- parental leaves; and
- pension and benefits.

In addition, CBAs often include language to assist in addressing:
• grievances and arbitrations;
• professional practice support and nursing advisory;
• health and safety of members; and
• continuing education, orientation, mentorship, and professional development.

Saskatchewan Context

The Saskatchewan Union of Nurses (SUN) was created in 1974 and represents registered nurses, registered nurse (nurse practitioners), and registered psychiatric nurses. SUN’s mission is to enhance the social, economic, and general well-being of its members, and to protect high-quality publicly funded and delivered health services. Members of a union also have a role—that being solidarity and active engagement, as a union is only as strong as the membership who engage in it.

Inclusion of Professional Practice Supports

In addition to the foundational role of collective bargaining, SUN has been innovative in developing additional ways to support its members. This includes acknowledging that many of the issues facing RNs were beyond the terms of the CBA. Concerns around workload, staffing, and the inability to uphold professional standards as developed by the professional regulatory body were not directly identified in the CBA. In this regard, the need for professional practice support was recognized. SUN created a professional practice arm of its union to work in conjunction and collaboration with the labour relations side of the organization. This includes utilization of RNs to assist members in meeting their professional standards. The professional practice team often meets with members and employers to discuss the requirements of the professional regulatory body and works to find ways to support professional practice, once again focusing on patient safety and quality outcomes.
SUN has also developed collaborative partnerships with many stakeholders including government, regional health authorities, and educational institutions in order to influence policy and health care decisions, implement best practice guidelines, and work on innovations to more effectively provide health care services. Some of the successes include implementation of patient care acuity assessment tools, nursing models of care, patient flow and utilization models, and initiatives aimed at reducing overtime utilization of RNs.

Impact of Unions

It is a common myth that unions and their members are solely interested in increasing salaries. Research shows that wages are often not within the top three priorities of collective bargaining (Akyeampong, 2005). This is also true of RNs in Saskatchewan. Over the last number of collective bargaining sessions, items such as safe staffing, manageable workloads, and ability to uphold professional standards have been the main priorities of members.

Figure 15.3.2 SUN signs Partnership Agreement with Saskatchewan Government, 2008

“SUN signs Partnership Agreement with Saskatchewan Government, 2008” by the Saskatchewan Union of Nurses is licensed under a [CC BY 4.0 International License](https://creativecommons.org/licenses/by/4.0/).

Nursing unions have significant impact on members, patients, and society as a whole and the benefits of unionization extend well beyond those of perceived simple self-interest. In fact, research has shown that the higher the number of unionized employees in a workplace, the better the overall health of workers and the lower the poverty rates, for both union and non-unionized workers (Mishel, 2012; Raphael, 2006). Nursing unions ensure safe practice environments; this translates into better care for patients (Twarog, 2005). Standards established in CBAs result in increased productivity for the employer through better training, less turnover, and longer tenure of the workforce (Yetwin, 2016).

One of the greatest benefits for patients is that registered nursing unions provide a consistent collective voice for RNs in the workplace. They empower RNs to actively participate in shaping health care reform and care delivery, affording them the protected right to stand up and speak out for their patients, their practice, and their profession. There is no greater patient advocate than a unionized registered nurse. Ultimately the work of the union is aimed at giving RNs a collective voice to advocate for themselves and for their patients, thus benefitting society as a whole.

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Updated: Wed, 21 Sep 2022 03:24:33 GMT
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For more information, see the comparison chart of union and non-union benefits hosted on the Massachusetts Nurses Association’s webpage Union Rights and Benefits, then answer the following question:

Would you prefer to work in an organization where the nurses are unionized or non-unionized? Explain your answer.